AGENCY NAME	
AGENCY PAY LOC	

# STATE CONTROLLER'S OFFICE EMPLOYEE INFORMATION SYSTEM OTHER EARNINGS AUTHORIZATION FOR CONTINUOUS AND DECLINING PAYMENTS ONLY

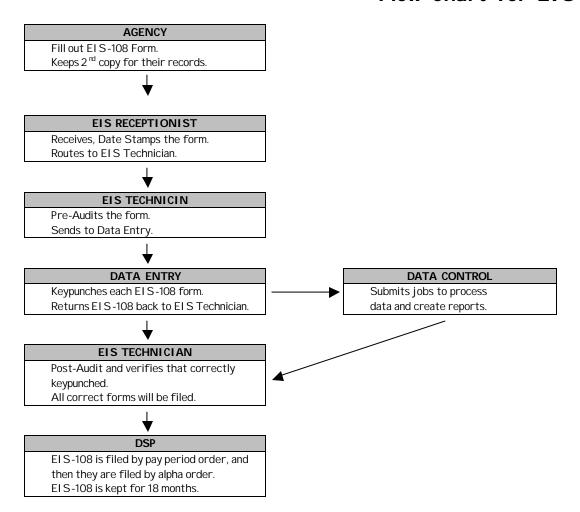
STATE OF IDAHO

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#### EMPLOYEE INFORMATION SYSTEM MANUAL

#### OTHER EARNINGS AUTHORIZATION FORM EIS-108

### Flow Chart for EIS-108



## EMPLOYEE INFORMATION SYSTEM MANUAL OTHER EARNINGS AUTHORIZATION FORM EIS-108

#### Purpose:

Other earnings allow an employee to be paid wages not related to hours.

310 transaction is used to add or update an employee's non-hourly earnings information. It allows payment to be:

 CONTINUOUS - Do not enter Original Amount. The pay period amount will be paid to the employee until the end date has been reached or an other earnings authorization form is submitted to delete the employee's other earnings.

An example of continuous other earnings is Legislative pay.

2. **DECLINING - Original Amount is required**. The pay period amount will be paid to the employee until the original amount has been paid.

An example of declining other earnings is contract holdback payable.

NOTE: 'One time' other earnings are done on a payroll time sheet (EIS-145) or a one-time other earnings authorization (EIS-107).

#### Requirements:

- The employee must be set-up on the employee file before other earnings authorization can be processed.
- This form can be used for 5 different employees if the effective date and earnings codes are the same.
- Other earnings code cannot be duplicated per employee for any calendar year.
- There needs to be an appointing authority signature and the signature has to be on file in the State Controller's Office, D S P.

#### **EMPLOYEE INFORMATION SYSTEM MANUAL**

#### OTHER EARNINGS AUTHORIZATION FORM EIS-108

**Procedures:** 

- To establish other earnings all information is required except for fields indicated as optional.
- Each field on the form, except for the Form Requirements, is preceded by a (3) digit code that is used only by data entry and for identification purposes.

### Form Requirements

FIELDS	EDIT	COMMENT
Agency Name:	The name of your agency.	Optional.
Pay Loc:	Can be 2 or 4 digits depending on how your agency is set up with EIS Control.	Optional.
User:	The initials of person filling out the form. PLEASE PRINT	Required. Length is 3.
S Org #:	3-digit code assigned to your agency.	Required. Length is 3.
Employee's Name:	Employee's first & last name is on this form for identification purposes only.	Required.
Remarks:	Agency's comments concerning data to be processed on form.	Required.
	Employee signature can be signed in this area.	
Authorized Signature:	The agency's appointing authority signature. This signature has to be on file with the State Controller's Office, DSP.	Required.
DFM Authorization:	This signature is for approval of data on the form.  The agency will route forms to DSP, then DSP will submit to Financial Management.	Required.
DHR Authorization:	<b>DHR'S</b> signature is required for approval of data on the form.	Required.
	The agency will route forms to DSP, then DSP will submit to DHR.	

# EMPLOYEE INFORMATION SYSTEM MANUAL OTHER EARNINGS AUTHORIZATION FORM EIS-108

### 310 TRANSACTION

**NOTE:** • This transaction does not adjust the Original Amount Balance.

• Amount fields cannot be negative.

FIELD	EDIT	COMMENT		
EFFECTIVE DATE	The pay period begins date that is entered, indicates when the action is effective.	Required. Length is 6.		
	Format = MMDDYY.			
	Refer to Calendar – Reference Section 4.15.			
CHANGE CODE	Enter the code that identifies the type of action.  'N' if SSN, Earnings Code & PCN are new.  'R' if REVISING Other Earnings Data.  When using Earnings Codes 'HR1' or 'HR2' the change code must be 'N'.	Required. Length is 1.		
EARNINGS CODE	Enter the 3-digit code identifying the other earnings code.	Required. Length is 3.		
PAY PERIOD AMOUNT	The gross dollar amount to be paid to the employee on his/her paydays.	Required. Length is 5.2.		
(214)	Does not need to be coded, if a change is being submitted with updates to other fields.			
	To stop other earnings, continuous or declining, zero fill the pay period amount.			
ORIGINAL AMOUNT (996)	Only code for 'declining' other earnings. Code the total amount to be paid to the employee.	Optional. Length is 5.2.		
	Note: When original amount is keyed the current balance is updated with a new amount. If original amount is changing after the employee has been paid from the Original Amount, the Current Balance will have to be reduced by what the employee has already been paid. Contact Division of Statewide Payroll (DSP).			

# EMPLOYEE INFORMATION SYSTEM MANUAL OTHER EARNINGS AUTHORIZATION FORM EIS-108

EDIT

**COMMENT** 

END DATE (975)	Do not use at this time				
	310 TRANSACTION				
FIELD	EDIT	COMMENT			
AGENCY	Do not use at this time.				
POSITION CONTROL NUMBER (PCN) (223)	The employee's 4-digit number assigned by the agency.	Required. Length is 4.			
	This field needs to be coded for all updates.				
OVERRIDE START DATE (217)	If an override situation exists, code a pay period begins date (cannot be retroactive).	Optional. Length is 6.			
	Format = MMDDYY.				
	Refer to Calendars – Reference Section 4.15.				
OVERRIDE AMOUNT (216)	If an override situation exists, code the pay period amount that should be paid to the employee.	Optional. Length is 7.2.			
	The override amount will be paid, instead of the pay period amount, for only the time period that is coded.				
	If an override amount is coded for a 'declining' other earnings, the original amount must also be updated.				
OVERRIDE END DATE (218)	If an override situation exists, code the pay period end date that would indicate when the override situation should be discontinued.	Optional. Length is 6.			

Format = MMDDYY.

Refer to Calendars – Reference Section 4.15.

**FIELD**